

PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

285-113 CON

In re Application of

Boyce et al.

Application Number

09/745,643

Filed

12/22/00

For KEYED INTERVERTEBRAL DOWEL

Group Art Unit

3738

Examiner

B. Pellegrino

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows

(check time period desired):

- | | |
|--|-------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110.00 |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ 430.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 980.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ 1,530.00 |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ 2,080.00 |

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 215.00

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1121

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

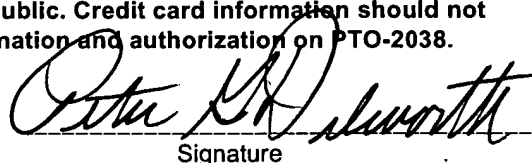
☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

11/5/2004

Date



Signature

Peter G. Dilworth, Reg. No. 26,450

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

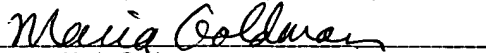
☐ Total of _____ forms are submitted.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to: Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on.

Dated: November 5, 2004

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Maria Goldman